

Quality Indicators for the MaineCare Primary Care Physician Incentive Payment (PCPIP) *

Measure	Child (C), Adult (A)	Look Back Period	Type [†]	Used by HEDIS
1. Unduplicated MaineCare Members Served per Period (Access): The number of MaineCare members enrolled in a site during the reporting period divided by the number of physicians at the site. (Note: To assure that providers practicing at multiple sites are appropriately reimbursed, the provider's time at the each site is assessed monthly. If a provider is at multiple sites during a month, the number of months attributed to each sites is 1/number of sites provider is at during month (i.e., if a provider is at two sites in the same month, the provider counts as .5 months for each site)	A,C	Measurement Year	A	
2. ER Utilization (Utilization): Average number of emergency room (ER) visits per member per reporting period	A,C	Measurement Year	U	✓
3. Children's EPSDT: Percentage of members 0-20 years of age who had one or more EPSDT procedure(s) during the reporting period	C	Measurement Year	Q	
4. Well-Child Visits in the First 15 Months of Life: Percentage of members who turned 15 months of age during the measurement year that had at least one well-child visit (Note: To provide the physician with additional information, the average number of well-child visits for these children will also be reported on the PC-PIP, but will not influence payment on this measure)	C	Up to 27 mos.	Q	✓
5. Well-Child Visits in 3rd, 4th, 5th and 6th Years of Life: Percentage of members who were three, four, five or six years of age who received one or more well-child visits with a PCP during the measurement year	C	Measurement Year	Q	✓

* Note: Many of these measures were developed based on the Healthcare Effectiveness Data and Information Set (HEDIS) measures developed by the National Center for Quality Assurance. In some instances the measures were modified to address data and population specifics of MaineCare members. To be eligible for the quality/prevention measures, MaineCare members served must have been enrolled at least six months in the managed care program.

[†] Type Definitions: A (Access/Availability of Care); U (Use of Services); E (Effectiveness of Care); C (Cost)

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6. Children and Adolescents' Access to a Primary Care Provider: Percentage of member aged 12-24mos., 25mos.-6yrs, 7-11yrs, and 12-20 yrs who had a visit with a PCP (12mos.-6yrs: 1 yr look back; 7-20 yrs: 2yr look back)	C	Up to 24 mos.	Q	✓(12-19) [‡]
7. Adolescent Well-Care Visits: Percentage of members who were 12-20 years of age and who had at least one comprehensive well-care visit with a PCP or OB/GYN during the measurement year	C	Measurement Year	Q	✓
8. Lead Screening 1st Year: Percentage of members who turned one during the reporting period and received a lead test (Note: the data used to measure lead screening comes from both MaineCare claims and the Maine Center for Disease Control (CDC))	C	Measurement Year	Q	
9. Lead Screening 2nd Year: Percentage of members who turned two during the reporting period and received a lead test (Note: the data used to measure lead screening comes from both MaineCare claims and the Maine CDC)	C	Measurement Year	Q	
10. Use of Appropriate Medications for Children with Asthma: Percentage of members 5-20 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year	C	24 mos.	Q	✓ (5-9, 10-17, 18-56, Total)
11. Initial Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication: Percentage of children 6-12 years of age newly prescribed ADHD medication, who had one follow-up visit within 30 days of when the first ADHD medication was dispensed	C	25 mos.	Q	✓
12. Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication: Percentage of children 6-12 years of age newly prescribed ADHD medication who have at least 3 follow-up care visits w/in a 10-month period, one of which is within 30 days of when the first ADHD medication was dispensed	C	25 mos.	Q	✓

[‡] Bracketed information identifies HEDIS age criteria when it varies from the PCPIP specification.

Measure	Child (C), Adult (A)	Look Back Period	Type [†]	Used by HEDIS
13. Adult Preventive: Percentage of members 21 years or older who had one or more EPSDT procedure(s) during the reporting period	A	Measurement Year	Q	
14. Adult's Access to Preventive/Ambulatory Health Services (AAP): Percentage of members 21-44 and 45-64 years of age who had an ambulatory preventive care visit	A	Measurement Year	Q	✓(20-44)
15. Cervical Cancer Screening: Percentage of women 21-64 years of age who received one or more Pap tests to screen for cervical cancer	A	36 mos.	Q	✓(21-64)
16. Chlamydia Screening in Women: Percentage of women 16-25 (children 16-20 and adults 21-25) years of age who were identified as sexually active (via pharmacy and/or claims data) and who had at least one test for Chlamydia during the measurement year	C/A	Measurement Year	Q	✓
17. Colorectal Cancer Screening: Percentage of adults 50-64 years of age who had appropriate screening for colorectal cancer	A	120 mos.	Q	✓ (50-80)
18. Breast Cancer Screening: Percentage of women 40-64 years of age who had a mammogram to screen for breast cancer	A	24 mos.	Q	✓(40-69)
19. Diabetic Care HbA1c: Percentage of members 21-64 years of age with diabetes (type 1 and/or type 2) who had a Hemoglobin A1c test in the measurement year	A	Measurement Year	Q	✓(18-64)
20. Diabetic Eye Care Exams: Percentage of members 21-64 years of age with diabetes (type 1 and/or type 2) who had a retinal eye exam performed	A	Measurement Year	Q	✓(18-64)
21. LDL measured within previous 24 mos.: Percentage of members 21-64 years of age with diabetes (type 1 and/or type 2) who had a LDL-C screening performed	A	24 mos.	Q	✓(18-64)